

1. · ]	UTILITY
μ٩	TENT APPLICATION
<b>-</b>	TRANSMITTAL
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Attorney Do	cket No.	PC10023A					
First Named	Inventor or Applic	J.T. Greenamyre					
Title	METHODS OF ANTAGONIST TO DOPAMINE AG	ADMINISTERING AN AMPA RECEPTOR TO TREAT DYSKINESIAS ASSOCIATED WITH GONIST THERAPY					

·s.	IRANSIVIIIAL	1100	ANTAGONIST TO TREAT DYSKINESIAS ASSOCIATED WITH DOPAMINE AGONIST THERAPY						
P ICK DOW OO	nprovisional applications under 37C.F.R. §1.53(b))	Express M	ail Label No. EM371532456US						
0	inprovisional applications under 57 C.F. IV. \$1.50(0))				1				
	APPLICATION ELEMENTS			ADDRE	SS TO:	Assistant Commissioner for Patent			
See MPEP cha	apter 600 concerning utility patent application cor	itents.				Box Patent Application Washington, DC 20231			
	*Fee Transmittal Form (e.g., PTO/SB/17)		6.	□ N	/licrofiche	Computer Program (Appendix)			
<u>~</u>	Specification [Total Pages	[12]]				r Amino Acid Sequence Submission N			
(	preferred arrangement set forth below)	12		(if applie	cable, all i 	necessary)			
	- Descriptive title of the Invention			a.	Co	mputer Readable Copy 😁 🗏			
	- Cross References to Related Applicatio		b. Paper Copy (identical to computer copy)						
	- Statement Regarding Fed sponsored R	&D	c. Statement verifying identity of above copies						
	<ul> <li>Reference in Microfiche Appendix</li> <li>Background of the Invention</li> </ul>			Α.	COMP	ANVING A DRI ICATION DA DEC			
	- Brief Summary of the Invention					ANYING APPLICATION PARTS			
	<ul> <li>Brief Description of the Drawings (if filed)</li> </ul>	d)	8.	按 ^	ssignmer	nt Papers (cover sheet & document(s))			
	- Detailed Description		9.			3.73(b) Statement Power of Attorney			
	<ul> <li>Claim(s)</li> <li>Abstract of the Disclosure</li> </ul>					e is an assignee)			
	- Abstract of the Disclosure		10.	E	nglish Tra	anslation Document (if applicable)			
3	Drawing(s) (35 U.S.C. 11.3)[Total sheets	]	11.			Disclosure Copies of IDS (IDS)/PTO-1449 Citations			
4. 🔲 C	Oath or Declaration [Total pages		12.	Р	reliminary	Amendment			
	a. Newly executed (original or copy)	<u> </u>	13.		•				
		<b></b>	13. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)						
	b. Copy from a prior application (37 CFR (Should be specifically itemized)  §1.63(d))  *Small Entity Statement filed in prior appli								
	(for continuation/divisional with Box 17 c	ompleted)	14.		statement(				
	[Note Box 5 below]	. ,			PTO/SB/0				
	i. <u>DELETION OF INVENT</u>	OR(S)	15.	$\bigcap$ c	ertified C	opy of Priority Document(s)			
	Signed statement attached deletin	•		(i	f foreign p	priority is claimed)			
	inventor(s) named in the prior appl see 37 C.F.R. §§1.63(d)(2) and 1.3								
5.	Incorporation By Reference (useable if Box		14.	$\square$	Other:	1. List of Inventors			
	ire disclosure of the prior application, from			ح لاعا	_	Express Mail Certificate of Mailing with			
copy of	the oath or declaration is supplied under E	lox 4b, is			-				
	onsidered to be part of the disclosure of the accompanying Label No. EM371532456US pplication and is hereby incorporated by reference therein.								
applicat	ion and is hereby incorporated by reference	e therein.							
			FEES, A	SMALL I	ENTITY STA	ORDER TO BE ENTITLED TO PAY SMALL ENTITY TEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT PLICATION IS RELIED UPON (37 C.F.R. § 1.28).			
17. If a Co	ONTINUING APPLICATION, check appropri	ate box, and su	pply the r	equisite i	information	below and in a preliminary amendment:			
Continuation Divisional Continuation-in-part (CIP) of prior application No:/					prior application No:/				
Prior application information: Examiner Group/Art Unit:					Group/Art Unit:				
	18.	CORRESP	ONDE	NCE A	DDRES	S			
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Customer Number or Bar					or	Correspondence address below			
Code Label	e Label   (Insert Customer No. or Attach bar code label here)								
Name	Paul H. Ginsburg								
Address									
	235 East 42nd Street								
City	New York State	NY	Zip Code 10017-5755						
Country	USA Telephone	212-573-542	25		Fax	212-573-1939			

NAME (Print/type)	Kristina L. Konstas	Registration No.	(Attorney/Agent)	37,864
Signature	Kustman.	Konstas	Date	09/04/98
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Comp	lete if Known	•		
Patel	Approved for us	-	9/30/2000.	551 <del>-</del> 0

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Examiner Name	Pa					First Na	med Inv	entor		J.T. Greenamyre		
METHOD OF PAYMENT (check only)		tity payments	<u>must</u> be	e supported by a small e	ntity statement,	Examine	er Name	)		Not Yet Assigned		
METHOD OF PAYMENT (check one)				•				,		Not Yet Assigned		
1.   The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:	Total Amo	ount of Payı	ment	(\$)		Attorney	Docke	No.		PC10023A		
Indicated fees and credit any over payments to:									FEE CA	LCULATION (continued)		
Deposition   Prizer Inc.     Prizer Inc.     Prizer Inc.     Prizer Inc.     Prizer Inc.     Prizer Inc.							-		Entity			
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Charge Any Additional   Gharge the Issue Fee Set in 37 Fee Required Under C.F.R. §§ 1.1.8 at Mealing of the Notice of Allowance.   137 J.F.R. §§ 1.1.8 at Mealing of the Notice of Allowance.   147	Account	Pfizer Inc.				105	130	205	65	Surcharge – late fee or o	oath	
CFR		Any Additiona	ıl			127	50	227	25		nal filing fee or	
147						139	130	139	130	Non-English specification	n	
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100   390   201   395   Utility filing fee   790.00   128   2,060   228   1,030   Extension for reply within fifth month   119   310   219   155   Notice of Appeal   119   310   219   155   Notice of Appeal   119   310   220   155   Filing a brief in support of an appeal   120   310   220   155   Filing a brief in support of an appeal   121   270   221   135   Request for oral hearing   138   1,510   138   1,510   138   1,510   Petition to revive - unavoidable   141   1,320   241   660   Petition to revive - unavoidable   141   1,320   242   660   Utility issue fee (or reissue)   142   1,320   242   660   Utility issue fee   144   670   244   335   Plant issue fee   144   670   244   335   Plant issue fee   145   136   146   1	ree Fee Code (\$)	e ree	Fee	Fee Description	Fee Paid	118	1,510	218	755	Extension for reply within fourth month		
106   330   206   165   Design filing fee   119   310   219   155   Notice of Appeal   120   310   220   155   Filing a brief in support of an appeal   120   310   220   155   Filing a brief in support of an appeal   120   310   220   155   Filing a brief in support of an appeal   121   270   221   135   Request for oral hearing   138   1,510   138	101 79			Utility filing fee	790.00	128	2,060	228	1,030	Extension for reply within fifth month		
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SUBMITTED BY Complete (if Applicable)		D BY								Complete (if Applicable	le)	
Type or Kristina L. Konstas Reg. Number 37,864 Printed Name		ne	Kristin	a L. Konstas	. / 1						37,864	
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## CERTIFICATE OF MAILING - EXPRESS MAIL



PFIZER DOCKET NO: PC10023A
APPLICATION NUMBER: Not Yet Assigned
TITLE: METHODS OF ADMINISTERING AN AMPA RECEPTOR ANTAGONIST TO TREAT DYSKINESIAS ASSOCIATED WITH DOPAMINE AGONIST THERAPY
APPLICANT: J. TIMOTHY GREENAMYRE, ET AL.
"Express Mail" mailing label number EM371532456US
Date of Deposit September 4, 1998
I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Assistant Commissioner for Patents, Washington, D.C. 20231.
Kristina L. Konstas  (Typed or printed name of person mailing paper or fee)
(Signature of person mailing paper or fee)

Pfizer, Inc Patent Department, 20th Floor 235 East 42nd Street New York, NY 10017-5755